

**Message: RE: ATA question**

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**✉ RE: ATA question**

**From** Crystal Gilliland  
**To** Kraft, Emily  
**Cc**  
**Journal Recipients** emily.kraft@oa.mo.gov  
**Date** Wednesday, March 22, 2017 3:51 PM

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Thank you, Emily! I have yet, another question! ☺ I have a client who is in foster care. Do we follow the same protocol for enrollment? Would I collect the household income? I wouldn't think so since she is a ward of the state, but my supervisor told me to check with you.

Thanks!

Crystal

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**From:** Kraft, Emily [mailto:[Emily.Kraft@oa.mo.gov](mailto:Emily.Kraft@oa.mo.gov)]  
**Sent:** Wednesday, March 22, 2017 3:43 PM  
**To:** 'Crystal Gilliland'  
**Subject:** RE: ATA question

Hi Crystal - Unfortunately, because Medicaid does cover methadone, I am not able to cover it with A2A funding, even though there are no Medicaid-registered locations in her area. However, the Department of Mental Health contracts with a CSTAR provider in Poplar Bluff, the Southwest Behavioral Health center at 3150 Warrior Lane. This particular facility does not provide methadone, but provides other services that may be used instead of methadone and could be Medicaid-eligible. The number we have on file for this provider is (573) 785-5333.

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**From:** Crystal Gilliland [mailto:[cgilliland@ccsomo.org](mailto:cgilliland@ccsomo.org)]  
**Sent:** Tuesday, March 21, 2017 3:05 PM  
**To:** Kraft, Emily  
**Subject:** RE: ATA question

Emily,

From the information I have gathered today, methadone is available under Medicaid; however, I was informed that there are only 2 facilities in the state of Missouri who have a Medicaid billing number (one in St. Louis & one in Kansas City). The facility that the client is using in Poplar Bluff-Behavioral Health Group-does not have a Medicaid billing number. Due to this, the client cannot get her methadone covered. The facility charges \$90 per week which includes medication, counseling, doctor's visits, bloodwork, urine tests. I called other treatment centers in the surrounding areas and was informed of the same information: they do not bill Medicaid.

I was informed that methadone is not a medication that can be prescribed by a family physician. This leaves the client forced to pay out of pocket for treatment. However, she cannot afford this

treatment. The facility stated that they provided the treatment until the client gives birth. She is giving birth today.

With these gaps in billing Medicaid, would her methadone be able to be covered by A2A?

Thanks for your help!

## Crystal Gilliland

Support Coordinator/Case Manager

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**From:** Kraft, Emily [mailto:[Emily.Kraft@oa.mo.gov](mailto:Emily.Kraft@oa.mo.gov)]

**Sent:** Monday, March 20, 2017 11:30 AM

**To:** 'Crystal Gilliland'

**Subject:** RE: ATA question

Hi Crystal,

I spoke with DSS, and they were of the understanding that Medicaid pays for methadone treatments though the Department of Mental Health. Assuming this client elects to receive A2A services from you moving forward, you would need to work with both Medicaid and DMH on getting that covered before attempting to submit it through the A2A program.

Thanks,

## Emily Kraft

*Alternatives to Abortion Program Manager*

*Truman Building, Room 430*

*Jefferson City, MO 65102*

*Phone: (573) 522-0003*

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**From:** Crystal Gilliland [mailto:[cgilliland@ccsomo.org](mailto:cgilliland@ccsomo.org)]

**Sent:** Wednesday, March 15, 2017 1:37 PM

**To:** Kraft, Emily

**Subject:** RE: ATA question

Emily,

I have a two part issue. (Sorry in advance). I have a new potential client who I attempted to enroll; however, the ATA system states she is already enrolled in services. She stated that she is not. Is there a way for you to look and see which program she is enrolled in? Her name is [REDACTED]

[REDACTED]

The second issue is that she is 9 months pregnant and has been receiving methadone treatments which she has been unable to pay for. She states that she needs to continue these treatments; however, the center where she is receiving treatments stated that once she gives birth they will no longer provide the treatments without payment. With the expanded services with the grant, would any assistance cover that?

Thanks in advance,

Crystal Gilliland

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**From:** Kraft, Emily [mailto:[Emily.Kraft@oa.mo.gov](mailto:Emily.Kraft@oa.mo.gov)]  
**Sent:** Tuesday, March 14, 2017 9:35 AM  
**To:** 'Crystal Gilliland'  
**Subject:** RE: ATA question

Go ahead and discharge her (you will need to do an EPDS first, and please be sure to use the "Repeat Pregnancy Before Infant is 1 Year of Age" discharge reason), then re-enroll her with the date she told you she was pregnant, then you should be able to fill out her new birthing outcome. You should be able to continue providing her with services until one year after her most recent birth.

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**From:** Crystal Gilliland [mailto:[cgilliland@ccsomo.org](mailto:cgilliland@ccsomo.org)]  
**Sent:** Tuesday, March 14, 2017 8:55 AM  
**To:** Kraft, Emily  
**Subject:** ATA question

Emily,

I received your email regarding the social security numbers. I will be calling you with the ones I have soon.

I have an issue with a client and need your input. One of my clients gave birth on 2/21/16; however, she soon became pregnant again. I spoke to my supervisor and it was decided to keep her in the program for the next pregnancy. She gave birth prematurely on 11/30/16. The issue now is that I was not able to enter the 2<sup>nd</sup> birthing report. In hindsight I believe we should have discharged her and then re-enrolled her when she found she was pregnant again. She continues to need assistance and we are unsure how to proceed as she is one year postpartum from her first pregnancy.

Crystal Gilliland

Support Coordinator/Case Manager

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